Disclosure					Amendment Yes No	
Use this form for general report and committee information, must be signed and submitted along with other detailed forms. Do not use this form to update information.						
1. Committee	STATE OF THE OWNER, WHEN THE PARTY OF	information.				-
a. Full Name	mormation					8
a. Fun Name	0		0	100	c. ID Number	-
Shea	Kan	nicez	Lic	() \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	00	1
b. Mailing Addres	s (include City, S	tate and Zip Cod	e)	1.109	d. Date Filed	-
1058 1	No Clu	b B	vd		M1-21-	1
Durhar	n. MC	27	101		e. Phone Number	-
Office	Acel	2	< `	tr. 225	(919) 672-86	26
2. Report Year	3. Period Sta	rt Date (mm/de	(vv) 4. Period	End Date (mm/dd/yy) 5	Treasurer Full Name	-
2 - 1 -	n	71 1			V I D	1
6017	Hpn 1	13,17	- Jun			10
6. Type of Com			9. Type of Re		ppe of report from one category)	
Candidate Can		arty	Municipal	State/County	Referendum	1
	=	eferendum oint Fundraiser	Organization	I— -		1
Legal Expense		int Fundraiser	Thirty-five d		Pre-referendum	
Logar Expense	Tunu		Pre-election	First Second	Final Supplemental Final	1
7. Type of Fund	(if applicable	e, check one)	Pre-runoff	Third	Supplemental Final Annual	1
Booster Fund			Semi-annual	Fourth	Special	1
Building Fund			Mid Ye	_	- opecial	
			Year En	d	10. Special Report Name	1
Other:			Final	Year Er		1
8. Number of Fi	undraisers thi	s Report	☐ Special	☐ Final		
	0			☐ Special		
11. Account Info	THE PERSON NAMED IN		美国等的	11. Account Informat	lion	1
a. Financial Institut	ion Full Name			a. Financial Institution Fu	ll Name	1
Wells	Fargo				v	
b. Purpose	,	c. Account Cod	le	b. Purpose	c. Account Code	1
Commir	ttee	Sp.4	4	b. Purpose JUL 2 8 2017	DΝ	
tuncls		d. Period Begin	Balance	JUL 28 2000	d. Period Begin Balance	l
		\$ 25	00	2017	\$	1
CERTIFICATION	ON	1.00.		DURHAM BOE		
I certify that the Committee or Fund is in compliance with all applicable provisions of Article 22A, 22B & 22D-22M of Chapter 163 of the NC General Statutes and that no funds are commingled with prohibited or other non-disclosed funds. I further certify that this report is complete, true and correct and that I have been trained by the NC State Board of Elections.						
Recohering L. Ramires 7-28-17						
Pri	nted Name of Sign		Sign	ature of Appointed Treasurer	Date	
FOR OFFICE USE ONLY						
Date Receive	d:	7/28/17	Employ	ee: <u>6</u> M	Delivery Method Normal Mail	
Date Postmar	ked:		Employ	ee:	Registered Mail Hand Delivered	
					☐ Electronically Filed	
Date Scanned	:		Employe	ee:		

Please Note: This form cannot be used to amend committee information such as the committee address, treasurer, assistant treasurer, custodian of books information, or account information.

You must amend the Statement of Organization (CRO-2100A-E) to make committee changes.

Detailed Summary

Amendment M No ☐ Yes

1. Committee Full Name (and Fund if applicable)	Use this form to summarize all disclosure reporting forms and to total monetary information 1. Committee Full Name (and Fund if applicable) 2. Type of Report 3.					
CI D		hov/co	3. ID Number			
Ohea Kamirez for Ma	400	Total this	Total this			
Start of Election Cycle: January 1, 😞 🗆 🔰	-	Reporting Period				
4) Cash on Hand at Start		\$ 25.00	\$ 0			
RECEIPTS						
5) Aggregated Contributions from Individuals	(CRO-1205)	\$ 0	s 0			
6) Contributions from Individuals	(CRO-1210)	\$ 1538.00	\$ 1563.00			
7) Contributions from Political Party Committees	(CRO-1220)	\$ 0	\$ 0			
8) Contributions from Other Political Committees	(CRO-1230)	\$ 0	\$ 0			
9) Loan Proceeds	(CRO-1410)	\$ 0	\$ O			
10) Refunds/Reimbursements to the Committee	(CRO-1240)	\$ O	\$ 0			
11) Other Receipt Sources						
11a) Interest on Bank Accounts	(CRO-1250)	\$ _	s –			
11b) Contributions from Not-For-Profit Organizations	(CRO-1250)	s –	s –			
11c) Outside Sources of Income	(CRO-1250)	s _	\$ -			
11d) Legal Expense Fund - Other Sources	(CRO-1270)	s _	s –			
11e) Exempt Purchase Price Sales	(CRO-1265)	s —	\$ -			
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9,10,11a,11b,11c,	11d and 11e)	\$ 1563.00	\$ 1563.00			
<u>EXPENDITURES</u>	NEW TOTAL	文學》。 图 18 图 28 28				
13) Disbursements		L MARKET AND A				
13a) Operating Expenditures	(CRO-1310)	\$ 1060.00	\$ 1060.00			
13b) Contributions to Candidates/Political Committees	(CRO-1310)	s <u> </u>	s —			
13c) Coordinated Party Expenditures	(CRO-1310)	\$ _	\$ _			
14) Aggregated Non-Media Expenditures	(CRO-1315)	\$ —	s <u> </u>			
15) Loan Repayments	(CRO-1420)	s <u> </u>	s —			
16) Refunds/Reimbursements from the Committee	(CRO-1320)	s —	\$ _			
17) In-Kind Contributions	(CRO-1510)	\$ 288.00	\$ 288.00			
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 13c)	5, 16 and 17)		4 10 10			
19) Cash on Hand at End (Add lines 4 and 12 together, then sub	otract line 18)	\$ 215.00	\$ 315.00			
ADDITIONAL INFORMATION						
20) Non-Monetary Gifts Given to Other Committees	(CRO-1330)	\$				
21) Outstanding Loans (incl. ones from other campaigns)	(CRO-1430)	\$				
22) Debts and Obligations owed by the Committee	(CRO-1610)	\$				
23) Debts and Obligations owed to the Committee	(CRO-1620)	\$				
24) Account Transfers Within the Committee	(CRO-1720)	\$				
25) Administrative Support	(CRO-1710)	\$	\$			
26) Forgiven Loans	(CRO-1440)	\$	\$			
27) 48-Hour Notice Reports Sum	(CRO-2220)	\$	\$			
28) Contributions to be Refunded CRO-1100 NC State Boar	(CRO-1215)	\$ IN	August 2008			

Cor	itributions	from Individu	ials	P	g _(_ of	Amendment Yes No
Use th	his form to repor	t individual contribu	tions over \$50 or		der \$50 if form CR	O 1205 is not used
1. Co	mmittee Full Na	ame (and Fund if ap	plicable)			2. ID Number
	shea (Raminez	for	Mayor	-	
3. Co	ntributor Inform				emove	IN PERSON
0.00	Name, Mailing Add			b. Job Title/Prof	ession	d. Comments
Λ	ude city, state, & zij			Sugar	roliva	JUL 2 8 2017
Ho	iren L	andrum			me/Specific Field	DURHAM BOE
، ها.	005 Ta	hoe Dr				
		46 27		401	Many 18	e. Election Sum to Date
(910) 431- 4401 Regional Transf						\$ 100.00
	g. Account Code		i. In-Kind Descri		j. Date (mm/dd/yyyy	
	SR44	online			6/14/2017	\$ 100.00
						\$
						\$
	tributor Inform			Add Re	move	
\$21948SEEEEE	Name, Mailing Add de city, state, & zip			b. Job Title/Profe	ession	. Comments
	Princip of the Princip Co.	A P. A. S.		OWNE	-	
5	ersnemia	L Ramin	~~	c. Employer's Nar	me/Specific Field	
10	Fieldin	ig Ct		SH'Bel	la Model	Election Sum to Date
3	Durham, MC 27703			eTales	of Harmede	
	,					\$ 1463.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Descrip	otion	j. Date (mm/dd/yyyy)	k. Amount
			Payment	Br Websit	5-22-1	7 \$ 1.68.00
	5244	transfer			5-26-17	\$ 800,00
	SR44 .	transfer			5-12-17	\$ 350,00
	tributor Inform			Add Ren		
	ame, Mailing Addre le city, state, & zip)	ess & Phone		b. Job Title/Profes	sion d.	Comments
-		1 0		OWNER		
Hel	Shemia	- Kamire	<	c. Employer's Nam		
(0	Hieldin	ug ct		SHBellA		Election Sum to Date
Dur	than, me	LRanire		4 TATEM	A Agencye.	1.1
Prior	g. Account Code	h. Form of Payment	i. In-Kind Descript	ion	j. Date (mm/dd/yyyy)	k. Amount
		_	Payment	for Jensey	5-15-17	\$ 100.00
			Event s	pace Con	hul 16	\$
			Payment		5/26/17	\$ 20.00
Total only this Page \$ 1538.00						
		O-1210 Pages				
(This lin	ne must be on line 6	of Detailed Summary Pa	ge CRO-1100)		\$	1538.00

Amendment

Disburser	ments				Pg (Amendment Yes No		
Use this form	to report expenditure	s from the commi	ttee for	operating e		utions to candidate/political		
committees an	d coordinated party	expenditures						
1. Committee	Full Name (and Fu	nd if applicable)				2. ID Number		
Shea	Kamira			M	ayer			
3. Type of Dis		se use separate C.			Control of the Contro	sbursement.)		
Operating Ex		ontributions to Candid	lates/Polit	ical Committe		pordinated Party Expenditures		
4. Payee Infor				Add	Remove			
	Mailing Address & P	hone		b. Coordin	ated Committee Nan	ne d. Comments		
(include city, stat				-		have receipt		
lashi	a Cromm	c1)		c. Level Re	gistered (Specify)	h.		
5601	Spring Gl	en In		Federal County:				
5601 Spring Glen In Raleigh, Mc 27614			State					
						\$ 1050.00		
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date	mm/dd/yyyy	j. Amount	k. Required Remarks		
SRYY	cash	0	5	12/17	\$ 350.00	Campaign mgr		
SR 44	CASH	0	51	19/17	\$ 350,00	Payment		
4. Payee Infor	mation			Add	Remove	719/120		
a. Full Name, Ma	iling Address & Phone			b. Coordina	ted Committee Nam	d. Comments		
(include city, sta	ate, & zip)							
		1		State	☐ Municip	s loso o o o		
. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)		k. Required Remarks		
ऽष्टिपप	CASH	0	5/2	26/17	\$350.00	CAMPAIGN MOR PYMT		
					\$			
. Payee Inform	Charles and the second			Add	Remove			
. Full Name, Mail (include city, sta	ling Address & Phone ite, & zip)			b. Coordina	ted Committee Name	e d. Comments		
Wells	Fargo			c. Level Registered (Specify)				
900	w club	Blvd		Federal	County:	245		
* 1	1.1	27724		State	☐ Municipa	dity: e. Election Sum to Date		
Durke		211-1				\$		
Account Code	g. Form of Payment	h. Purpose Code	Data (nm/dd/yyyy)				
SR44	TRANSFER				j. Amount	k. Required Remarks		
31077	(ICAMO) FEIC	0	010	26/17	\$ 10.00	BANKI FEES		
m					\$			
. Total only th						\$.1060.00		
	CRO-1310 Pages							
(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating					es)	: 1060.00		
This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm) This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)								
	odes (List detailed			THE RESERVE OF THE PARTY OF THE	Expenauures)			
* - Media	B* - Printir			ndraising	D - To A	Another Candidate		
- Salaries	F* - Equip	0		tical Party		olding Public Office Expenses		
Postage J - Penalties K* - Office Expenses O* - Donation to Legal Expense Fund								
* Other	IN PERSO	,		-				
Codes require	e detalled explanati	n in required re	marks t	field (k)	45.43%	Sections are a second		

DURHAM BOE

Amendment

			Amendment
In-Kind Contributions	Pg	of	Yes No
Use this form to report non-monetary contributions, donations, goo			tee or fund.
Use CRO-1215 if In-Kind Contributions were or will be refu	nded within 7 da	ys.	
1. Committee Full Name (and Fund if applicable)			2. ID Number
Shea Ramirez for	Mayor	-	
3. Contributor Information	Add Re	move	
a. Full Name, Mailing Address & Phone	b. Type of Contri	butor	c. Comments
(include city, state, & zip)	Individual		
Kershemia Ranirez	Candidate Party		
10 Fielding of	PAC Referendum		d. Election Sum to Date
Durham, MC 27703	Other Receipt	t Source	\$ 288.00
		E Date (/44/	
e. Description		f. Date (mm/dd/yyy	yy) g. Fair Market Amount
Payment or Websitz		5-22-1	
Payment for Deposit (Cer	utral Park)	5-15-17	
Payment Br Maps (30	٤)	5-26-17	\$ 20.00
3. Contributor Information	Add Re	move	
a. Full Name, Mailing Address & Phone	b. Type of Contri	butor	c. Comments
(include city, state, & zip)	Individual		
	Candidate		
	Party PAC		
	Referendum		d. Election Sum to Date
	Other Receip	t Source	
			\$
e. Description		f. Date (mm/dd/yyy	yy) g. Fair Market Amount
			\$
			\$
		2	\$
3. Contributor Information	Add Re	move	COLUMN THE RESERVE
a. Full Name, Mailing Address & Phone	b. Type of Contri		c. Comments
(include city, state, & zip)	Individual		
	Candidate		
	Party		
	☐ PAC		
	Referendum		d. Election Sum to Date
	Other Receipt	t Source	\$
e. Description		f. Date (mm/dd/yyy	yy) g. Fair Market Amount
IN PERSON			\$
JUL 2 8 2017			\$
DURHAM BOE		-	
DURHAM 50-			\$

4. Total only this Page

5. Total of ALL CRO-1510 Pages

(This line must be on line 17 of Detailed Summary Page CRO-1100)

288.00

\$ 288.00